FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGAN	NIZATION	
	(See ins	structions)	Office use only
NAME OF COMMITTEE (in	full) (Check if na is changed)	Example: If typying, type over the lines	12FE4M5
CityPAC			
ADDRESS (number and	PO BOX 1198		
(Check if addis changed)	ress Chicago		IL
		CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA			
treasurer@ci	ypac.org 		
COMMITTEE'S WEE	PAGE ADDRESS (URL)		
www.citypac	.org		
COMMITTEE'S FAX	NUMBER		
با لبنا	لسا لــ		
2. DATE <b>0</b> .	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFIC	ATION NUMBER	C C00187526	
4. IS THIS STATE	MENT NEW (N)	OR X AMENDED (A)	
I certify that I have exam	nined this Statement and to the best of	my knowledge and belief it is true, correct	at and complete
Type or Print Name o	Treasurer David Epst	ein	
Signature of Treasure	r Electronically Filed by <b>Davi</b>	d Epstein	Date 04 / 25 / YYYYY
NOTE: Submission of f		tion may subject the person signing this	Statement to the penalties of 2 U.S.C. S437g.
Office Use Only		For further informati Federal Election Com Toll Free 800-424-95 Local 202-694-1100	mission FEC FORM 1

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	FEO <b>Fo</b> rn	<b>1 1</b> (Revised 02/2003)	Page 2
5.	TYPE OF COM	MMITTEE (Check One)	
	(a) (b)	This committee is a principal campaign committee. (Complete the candidate information below.)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete tripformation below.)	he candidate
	Name of Candidate	information below.)	
	Candidate Party Affiliation	Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	(e)	This committee is a separate segregated fund	
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee.	ed fund or party
6.	Name of Any	Connected Organization or Affiliated Committee	
ı	None		<b>.</b> 1
- 			
			<u> </u>
	Mailing Addres	s	
		CITY STATE A	ZIP CODE
	Relationship		
	Type of Conne	cted Organization:	
	Corpo	ration Corporation w/o Capital Stock Labor Organ	ization
	Meml	pership Organization Trade Association Cooperative	

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W	rite or Type Committee Nam	ne		
	CityPAC			
7.	Custodian of Records: possession of Commit	Identify by name, address, (phone numbertee books and records.	optional), and position of th	ne person in
	Full Name Dav	id Epstein		
	Mailing Address	2300 N. Commonwealth Av	re. #7A	
		Chicago	<u>IL</u>	60614 _
	Title or Position ▼	CITY A	STATE <b>▲</b>	ZIP CODE A
			Telephone number	
3.	Treasurer: List the nar name and address of a	me and address (phone number optional) of any designated agent (e.g., assistant treasurer	the treasurer of the commi ).	ttee; and the
	Full Name of Treasurer  Dav	id Epstein		
	Mailing Address	2300 N. Commonwealth Av	re. #7A	
		Chicago	<u>IL</u>	60614
	Title or Position ♥	CITY A	STATE A	ZIP CODE A
	Treasu	rer	Telephone number 773	248 1628
	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ▼	CITY A		ZIP CODE A
			Telephone number	<u> </u>

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Banks or Other Depositorsafety deposit boxes or ma	aintains funds.	nts, rents
Name of Bank, Depository	r, etc.	
Sm	nith Barney - Money Funds	
Mailing Address	10 South Wacker Drive	1 1 1 1 1
	Suite 2800	
	Chicago IL 606	06
	CITY A STATE A ZIF	CODE A
Name of Bank, Depository	v, etc.	
Mailing Address		

CITY 🔼

STATE **△** 

ZIP CODE 🛕

Image# 28990936550		
Form/Schedule: <b>F1A</b> Transaction ID:	Change in Treasurer. New Treasurer is David Epstein.	
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